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Debtor 1 Shawm D. Gardiner First Name Middle Name Last Name	Fil	in this information to	identify your ca	ase:					
Debtor 2 (Spouse, if Illing) First Name Mickde Name Last Name	D	ebtor 1	Shawn	D.	Gardiner				
Check if this is: Check if this is: Eastern District of Pennsylvania Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following de (in known) An amended filing A supplement showing postpetition chapter 13 income as of the following de (in known) An amended filing A supplement showing postpetition chapter 13 income as of the following de (in known) An amended filing A supplement showing postpetition chapter 13 income as of the following de (in known) An appear of			First Name	Middle Name	Last Name				
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Case number (If known) Official Form 106 Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying composes is living with you, include information about your spouse. If you are separated and you spouse is living with you, include information about your spouse. If you are separated and you spouse is not filing with you, do not include information about your spouse. If you are separated and you spouse is living with you, include information about your spouse. If you are separated and you spouse is living with you, include information about your spouse. If you are separated and you spouse is living with you, include information about your spouse. If you are separated and you have more than one job, attach a separate page with information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's name Employer's name Employer's address Number Street Number Street Number Street Number Street For Debtor 1 for Debtor 2 or non-filing spouse none and the properties of that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 for Debtor 2 or non-filing spouse none than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.	U	nited States Bankrup	tcy Court for the	e: Easte	rn District of Penns	ylvan	ia		_
Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying core normation. If you are married and not filing jointly, and your spouse is filing with you, include information about your appouse. If you are separated and you spouse is not include information about your spouse. If you are separated and you spouse is not include information about your spouse. If you are separated and you spouse is not include information about your spouse. If you are separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 11 Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if if applies. Employer's andress Employer's address Number Street Number Street Number Street Part 22 Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or you ron-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse deductions,) If not paid monthly, calculate what the monthly wage would be. 2			23-1127	5-mdc					
Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correntormation. If you are married and not filling jointly, and your spouse is nifling with you, include information about your spouses. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 11								_	MM / DD / YYYY
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Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correntormation. If you are married and not filling pithly, and your spouse is living with you, include information about your spouse. If you are separated and you spouse is not more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 12 Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Cocupation may include student or homemaker, if it applies. Employer's name Employer's address Employer's address City State Zip Code The position of the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroli deductions). If not paid monthly, calculate what the monthly wage would be. 2- 80.00 Solo Solo Solo Solo Solo Solo Solo Sol									
part 1: Describe Employment 1. Fill in your employment information about your spouse, if more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Cocupation Employer's name Employer's address Cocupation any include student or homemaker, if it applies. Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions,) If not paid monthly, calculate what the monthly wage would be. 2. \$0.00 So.00	<u>S</u>	chedule I:	<u>Your In</u>	come					12/1
If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation Employer's name Employer's address Cocupation Mumber Street City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City Occupation the space. Include your non-filling spouse unless you are separated. If you or your non-filling spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filling spouse Employed Not Employed Self-Employed Pood Delivery Driver Employer's name Employer's address Number Street Number Street Number Street Number Street Number Street Figure 2 in the space. Include your non-filling spouse unless you are separated. If you or your non-filling spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filling spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 2. \$0.00 \$0.00	Pa	rt 1: Describe E	mployment	case number (if knowi	n). Answer every qu	estio	n.		
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Employer's address Occupation may include student or homemaker, if it applies. Employer's address Number Street		information about add	dditional	Occupation	Self-Employe	ed Foo	od Delivery [Driver	
Occupation may include student or homemaker, if it applies. Number Street		Include part time, se	easonal, or	Employer's name	-				
Occupation may include student or homemaker, if it applies. City State Zip Code City State Zip Code		self-employed work	•	Employer's address					
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2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 2. \$0.00 \$0.00	Pa	Estimate monthly i unless you are sepa If you or your non-fi	ncome as of th arated. ling spouse hav	e date you file this form		_	tion for all er	nployers fo	or that person on the lines below. If you need
deductions.) If not paid monthly, calculate what the monthly wage would be. 2. \$0.00 \$0.00							For I	Debtor 1	
3. Estimate and list monthly overtime pay. 3. + \$0.00 + \$0.00 + \$0.00	2.					2.		\$0.00	\$0.00
	3.	Estimate and list m	onthly overtim	е рау.		3.	+	\$0.00	+\$0.00

\$0.00

\$0.00

4. Calculate gross income. Add line 2 + line 3.

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Document Debtor 1 Gardiner Shawn D. Case number (if known) 23-11275-mdc Middle Name Last Name First Name For Debtor 1 For Debtor 2 or non-filing spouse \$0.00 \$0.00 Copy line 4 here..... List all payroll deductions: \$0.00 \$0.00 5a. Tax, Medicare, and Social Security deductions 5a. \$0.00 \$0.00 5b. Mandatory contributions for retirement plans 5b. \$0.00 \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 \$0.00 5e. Insurance 5e. \$0.00 \$0.00 5f. Domestic support obligations 5f. \$0.00 \$0.00 5g. Union dues 5g. \$0.00 \$0.00 5h. Other deductions. Specify: 5h \$0.00 \$0.00 Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$0.00 \$0.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total \$3,300.00 \$0.00 monthly net income. 8a. \$0.00 \$0.00 8b. Interest and dividends 8b. 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce \$0.00 \$0.00 settlement, and property settlement. 8c \$0.00 \$0.00 8d. Unemployment compensation 8d. \$0.00 \$0.00 8e. Social Security 8e. 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. \$0.00 \$0.00 Specify: _ 8f. \$0.00 \$0.00 8g. Pension or retirement income 8g. \$0.00 \$175.00 8h. Other monthly income. Specify: Estimated pro rata 2023 federal 8h. tax refund 9 **Add all other income.** Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. \$3,475.00 \$0.00 Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 10. \$3,475.00 \$0.00 \$3,475.00 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.

12.	Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that
	amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies

Combined monthly income					
12.	\$3,475.00				
11. 🕶	\$0.00				

13. Do you expect an increase or decrease within the year after you file this form?

√ No.	
Yes. Explain:	

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Debtor 1 Gardiner Shawn D. Case number (if known) 23-11275-mdc First Name Middle Name Last Name 8a. Attached Statement **Food Delivery** FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.) PART A - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME: 1. Gross Monthly Income: \$3,000.00 PART B - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES: Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition **Business Debts** TOTAL PAYMENTS TO SECURED CREDITORS \$0.00 Other Expenses TOTAL OTHER EXPENSES \$0.00 \$0.00 4. TOTAL MONTHLY EXPENSES(Add item 2 - 21) PART C - ESTIMATED AVERAGE NET MONTHLY INCOME: 5. AVERAGE NET MONTHLY INCOME(Subtract item 22 from item 1) \$3,000.00

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Debtor 1 Shawn D. Gardiner Case number (if known) 23-11275-mdc Middle Name Last Name First Name 8a. Attached Statement **Rental Income** \$300.00 1. Gross Monthly Income: TOTAL EXPENSES \$0.00 AVERAGE NET MONTHLY INCOME \$300.00

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to identify your case:					
Shawn	D.	Gardiner			
First Name	Middle Name	Last Name			
First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		Eastern District of Pennsylvania			
23-11275-m	dc				
	Shawn First Name First Name uptcy Court for the:	ShawnD.First NameMiddle NameFirst NameMiddle Name			

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an attorney to h	elp you fill out bankruptcy forms?
☑No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the summary a	nd schedules filed with this declaration and that they are true and correct.
/s/ Shawn D. Gardiner	
Shawn D. Gardiner, Debtor 1	
Date 04/11/2024	
MM/ DD/ YYYY	